U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title:	Case Number:						
An appearance is he	reby filed by the unders	igned as a	itto	rney for	:		
Attorney name (type	or print):						
Firm:							
Street address:							
City/State/Zip:							
Bar ID Number: Telephone Numb See item 3 in instructions)			Number	:			
Email Address:							
Are you acting as lea	d counsel in this case?				Yes	No	
Are you acting as loc	al counsel in this case?				Yes	No	
Are you a member of the court's trial bar?					Yes	No	
If this case reaches trial, will you act as the trial attorney?				•	Yes	No	
If this is a criminal ca	I	Re	tained C	Counsel			
			•	•	Counse d counse		ou′
			а	• •	l Defend	•	
			CJA Panel Attorney				
general bar or be granted I declare under penalty of	this Court an attorney must of leave to appear pro hac vice perjury that the foregoing is has the same force and effect	e as provide true and co	d fo	or by local ct. Under 2	l rules 83. 28 U.S.C.§	12 throug §1746, th	h 83.14.
Executed on							
Attorney signature:	S/(Use electronic signature	if the appear	ran	ce form is	filed elec	 tronically	.)